COMBINED DECLARATION AND POWER OF ATTORNEY

As the below named inventor, I hereby declare that:

FAX: 886-2-2369 7233

My residence, post office address and citizenship are as stated below next to my name and that I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

LASER ANNEALING APPARATUS AND LASER ANNEALING PROCESS

the specification of wh	nich				
_X is attached here was filed on	to.				
as Application S	erial No	and was amended on_		·	
specification, including I acknowledge t application in accorda I hereby claim fo application(s) for pate	g the claims, as amended he duty to disclose infor- nce with Title 37, Code of reign priority benefits und ent or inventor's certifical patent or inventor's certifical imed:	nd understand the content of by any amendment referred mation which is material to of Federal Regulations, § 1 der Title 35, United States Co ate listed below and have ficate having a filing date be	ed to above. o the patent .56(a). Code, § 119 also identifi	ability of this of any foreign	
Number	Country	Date Filed(yyyy/mm/dd)	Yes	No	
93106427	Taiwan, R.O.C.	2004/3/11	X		
))			
SEND CORRESPONDENCE TO:			DIRECT TELEPHONE CALLS TO: (Name and telephone number)		
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COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

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